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AUG 17 2020

To The Honorable Stephen N. Limbaugh Jr.

U. S. DISTRICT COURT  
EASTERN DISTRICT OF MO.  
CAPE GIRARDEAU

I'M ASKING FOR YOUR ASSISTANCE IN REGARDING TO  
THIS PANDEMIC OF COVID 19 AT THE USP MARION  
DUE TO THE DEATHS AND THE SPREADING AT THIS  
FACILITY I'M ASKING FOR A COMPASSIONATE RELEASE  
AND OR HOME CONFINEMENT DUE TO THE FACT OF  
ME MEDICAL ISSUES OF HIGH BLOOD PRESSURE AND  
SEIZURE DISORDERS I'M A HIGH RISK FACTOR WITH  
THESE TERMINAL ILLNESS WITH A END OF LIFE PROJECTION  
I KNOW WHEN YOU SENTENCED ME IT WAS NOT TO DEATH  
WITH ME REMAINING LOCK UP WHERE THERE'S NO SOCIAL  
DISTANCING THIS IS A DEATH SENTENCE A TIME BOND  
WAITING TO GO OFF I'VE BEEN PUT IN A THREE  
MAN CELL AND COVID-19 IS ALL AROUND ME IF  
YOU CAN HELP ME IN THIS MATTER IT WOULD GREATLY  
BE APPRECIATED I HAVE ADDRESS A LETTER TO  
MY LAWYER STEPHEN WILSON ALSO IN THIS MATTER

THANK YOU

Michael McRae

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AUG 17 2020

DATE REVIEWED: 10-24-19

U.S. DISTRICT COURT  
EASTERN DISTRICT OF MO  
CAPE GIRARDEAU

INSTITUTION: USP Atlanta UNIT: A

INMATE NAME: McNair REG NO: 46483-044

FIRST STEP ACT (Circle One):  ELIGIBLE  INELIGIBLE

RECIDIVISM RISK LEVEL (Circle One):  MINIMUM  LOW  MEDIUM  HIGH

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JULY 1, 30 /2020

U. S. DISTRICT COURT  
EASTERN DISTRICT OF MO

CAPE GIRARDEAU

(Month)

(Day)

Submitted to Prison Staff on:

Dear Warden O SPROUT:  
(Warden's Last Name)

My name is Michael McNair and my Register No. is 46485-044. I am writing to respectfully request that I be considered for an early release from prison under the Compassionate Release Program, under 18 U.S.C. § 3582(c)(1), and that you treat this as a formal request for a reduction in sentence (RIS).

I believe I am a good candidate for Compassionate Release for the following reasons. I have been incarcerated since 05-15-2018. I am currently 59 years old.

Since I have been incarcerated, I have received the following medical treatment:

Seizure disorder AND high Blood Pressure

Due to Brain Injury

My current physical and mental health problems include: I have short term memory lost and my right side is weak due to a brain injury I have two plates in my head

I take the following medications: Propranolol, Famotidine, OXCARAZEPINE DIVALPROEX, Phentoin, Chlorpheniramine maleate, naproxen

I believe I am (or a family member who needs my care is) at high risk of complications from COVID-19 because my seizure disorder AND high Blood pressure AND my age and my Brain Injury

Other information that makes me a good candidate for compassionate release includes: On top of the fact of my age and medical history with my brain injury and seizure disorder High Blood pressure

When I am released from prison, I plan to live with my fiancee

at 704 BRENDA Lane Dexter MO 67841

Based on the information above, given my personal circumstances and the COVID-19 pandemic, I request early release under the Compassionate Release Program.

Thank you for your time and consideration.

Michael McNair, Register Number: 46485 - 044  
(Full name)

Danielle Septer & Michael McNair  
104 Brenda Lane, Apt. 11  
Dexter, MO 63841

SAINT LOUIS MO 63101

14 AUG 2020 PM 9:1



C/O Judge Rush Limbaugh/Clerk  
555 Independence St.  
Cape Girardeau, MO 63703

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EASTERN DISTRICT OF MO  
CAPE GIRARDEAU

63703-623555

[A series of vertical bars of varying heights, likely a barcode.]